

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	KB TA	SC-916 1113	10-12-01
RESPONSE FORMALITY REVIEW			1-17-02

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final Original	✓ 8 2
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If more than 150 claims or 10 actions  
staple additional sheet here

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